

Entered -8-10-99 - sb
CL 99L0506 - GWENDOLYN BURNS

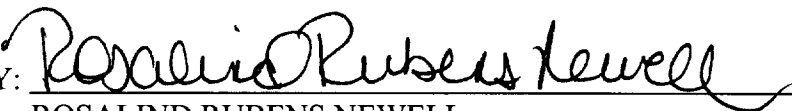
CLAIM OF:

JOHN I. WARREN
110 Terrace Drive, NE
Atlanta, Georgia 30305

01-*R*-0393

For damages alleged to have been sustained due to a flood which occurred as a result of a creek overflow on July 6, 1999 at 110 Terrace Drive, NE.

THIS ADVERSED REPORT IS
APPROVED

BY: 
ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0506

Date: February 2, 2001

Claimant /Victim JOHN I. WARREN
BY: (Atty) (Ins. Co.)
Address: 110 Terrace Drive, NE, Atlanta, Georgia 30305
Subrogation: Claim for Property damage \$ 2,500.00 Bodily Injury \$
Date of Notice: 8/2/99 Method: Written, Proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X
Date of Occurrence 7/6/99 Place: 110 Terrace Drive, NE,
Department PUBLIC WORKS Division SEWER OPERATIONS
Employee involved Disciplinary Action:

NATURE OF CLAIM: Claimant sustained property damage when his residence was flooded as a result of the creek overflowing behind his home on the above-listed date. An investigation determined that tree logs were lodged inside of a storm drain catch basin which inhibited the system from properly disposing the storm water. Further research determined that the City did not have any complaints of debris or fallen trees in the creek until after the date of claimant's incident. Additionally, the City experienced an unusually large amount of rainfall during a severe rain storm, an "act of God", on the day of the incident which caused the creek to overflow. The City is immune from liability as set forth in O.C.G.A. §36-33-1.

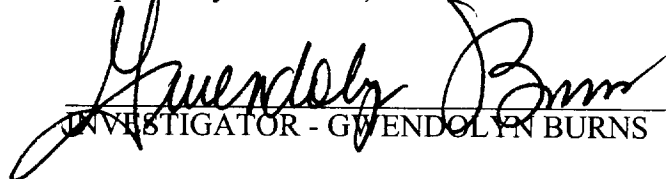
INVESTIGATION:

Statements: City employee X Claimant Others Written X Oral
Pictures Diagrams Reports: Police Dept Report X Other
Traffic citations issued: City Driver Claimant Driver
Citation disposition: City Driver Claimant Driver

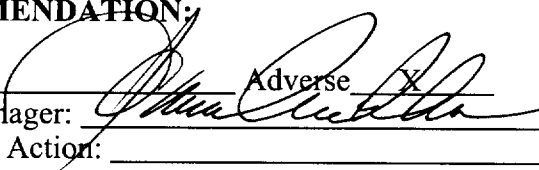
BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial
Improper Notice More than Six Months Other X Damages reasonable
City not involved Offer rejected Compromise settlement
Repair/replacement by Ins. Co. Repair/replacement by City Forces
Claimant Negligent City Negligent Joint Claim Abandoned

Respectfully submitted,


INVESTIGATOR - GWENDOLYN BURNS

RECOMMENDATION:

Pay \$ Adverse X Account charged: 1A01 2J01 2H01
Claims Manager:  Concur/date 03-01-01
Committee Action: Council Action

COUNCIL OF THE CITY OF ATLANTA
MUNICIPAL CLERK

City Hall
55 Trinity Avenue, S.W.
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

Today's Date: 7/26/99

ENTERED - 8-10-99 - SB
99L0506 - GWEN BURNS

Dear Municipal Clerk:

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ 2,500.00 property and/or \$ 0 bodily injury for which I contend the City is liable.

1. Date of incident: July 6, 1999 (month/day/year) 2. Time of Incident: 5:00 pm 3. Police called: Yes ☒ No
4. Location of incident (including street address): 110 Terrace Dr., Atlanta, GA 30305
5. Name of your insurance company: Cotton States - No claim Policy No. GH00579788
6. State what and how incident occurred: Drainage creek in rear yard overflowed due to poor maintenance up stream. Blockage broke & sent an eight foot wall of water surging through yard - damaging yard/equipment/personal belongings - City is negligent maintenance. Seen on channel 2 News 6:pm in keeping creek free flowing
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!
8. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).

Your vehicle: _____
(Make) (Year) (Tag Number) (Driver's Name)

City vehicle: _____
(Make) (City Driver's Name) (Department/Bureau)

9. Witness: _____
(Name) (Address) (Telephone Number)

10. The acknowledgement of this claim in no way waives the Sovereign immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).

11. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

[Signature]
Signature of Claimant

John I. Warren
(Print Claimant's Name)

110 Terrace Dr.
(Address)

Atlanta, GA. 30305
(City, State and Zip Code)

4.233.6599 4.262.0980
(Work Number) (Home Number)

01-R-0393